

**Amended Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Springfield Technical Community College

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: One Armory Square, Springfield, MA 01102-9000

Name of Agent Designated to Receive Notification of Claimed Infringement: Eileen C. Cusick

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):
Springfield Technical Community College, One Armory Square, Ste. 1
PO Box 9000, Springfield, MA 01102-9000

Telephone Number of Designated Agent: 413-755-4014

Facsimile Number of Designated Agent: 413-755-6300

Email Address of Designated Agent: cusick@stcc.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: Eileen C. Cusick will replace Robert Baraldi in this capacity.

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 10/4/05

Typed or Printed Name and Title: Janet D. Wanczyk*

VP of Administrative Services / CFO

*Added by CO
per signature

Note: This Amended Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.

SCANNED 11/08/05

147526777



147526777

RECEIVED

OCT 27 2005

COPYRIGHT OFFICE